PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003

Application or Docket Number

10665203

•		CLAIMS AS	ma 2)	_	SMALL EI	YTITY		OTHER				
TOTAL CLAIMS			(Column 1)		(Column 2)					OR 1	SMALL	
FOR								RATE	FEE		RATE	FEE
			NUMBER FILED		NUMBER EXTRA			Basic Fee	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			29 minus 20=		• •			X\$ 9=	. 61	OR	X\$18=	
INDEPENDENT CLAIMS			5 minus 3 =		2			X42=	84	OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0"						olumn 2		TOTAL	510	OR	TOTAL	
	CLAIMS AS AMENDED - PART II										OTHER THAN	
႕	(Cotumn 1)			(Colum				SMALL	ENTITY	OR	SMALL ENTITY	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 46	Minus	" 2	9	•		X\$ 9=		OR	X\$18=	
	Independent	* 5	Minus	MAN OF NOTE AND ENTER	<u> </u>	-		X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	OR	+280=	
								TOTAL ODIT. FEE	松	OR	TOTAL ADDIT. FEE	
_		(Column 1)		(Colun		(Column 3)				_		
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID 1	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• 46	Minus	• 4	6	•		X\$ 9=		OR	X\$18=	
	Independent	* 5 NTATION OF MIL	Minus	### S	<u> </u>	6		X42≈		OR	X84=	
			CIN CE DEF	CHOCHI	CLPUM		' [+140=		ОЯ	+280=	
•								TOTAL DOIT, FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colum		(Column 3)	,					
WENT C		REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDME	Total	A	Minus	**		۵.		X\$ 9=		OR	X\$18=	
₹	Independent	•	Mimus	***				X42=			X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR		
* If the entry in column 1 is less than the entry in column 2, write "O" in column 3.								+140=		OR	+280=	
Ti the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEEOR ADDIT. FEEOR ADDIT. FEEOR												
•	The "Highest Num	ber Previously Pai	d For' (Total or	Independe	int) is the	highest number	r four	qqa enti ni br	ropriate box	in col	ump 1.	1
FORM	PTO-875 (Rec. 12	702) TIS G	overnment Printing	Office: 2000	400.48470	Ne s	Code	ed mand Throughout	ort Office (II)		ADVIEW OF	